

# BEST AVAILABLE COPY

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	<i>m G</i>		<i>10/21/99</i>
O.I.P.E. CLASSIFIER	<i>MTN</i>	<i>5a</i>	<i>10-26-99</i>
FORMALITY REVIEW	<i>SL</i>	<i>DeMN</i>	<i>11-5-99</i>

## INDEX OF CLAIMS

✓ ..... Rejected  
 = ..... Allowed  
 - (Through numeral) Canceled  
 - ..... Restricted  
 N ..... Non-elected  
 I ..... Interference  
 A ..... Appeal  
 O ..... Objected

Claim	Final	Original	Date
1	1	1	
2	2	2	
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Claim	Final	Original	Date
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Claim	Final	Original	Date
110	110	110	
112	112	112	
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If more than 150 claims or 10 actions  
staple additional sheet here

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